Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Howard First name Wilbur Middle name Lancaster Last name and Suffix (Sr., Jr., II, III)	Jeannine First name Maureen Middle name Lancaster Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6768	xxx-xx-6183

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and	■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)
	doing business as names	EINs	EINs
5.	Where you live	5471 Courier Court Cincinnati, OH 45238	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Hamilton	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition,	Check one: Over the last 180 days before filing this petition, I
		I have lived in this district longer than in any other district.	have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

		ward Wilbur La annine Maureen		er			Case number (if known)	
Par	t 2: Tell	the Court About Y	∕our Bank	ruptcy Ca	ase			
7.	Bankrup	oter of the tcy Code you are	Check on (Form 20			of each, see <i>Notice Required by</i> page 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for B te box.	ankruptcy
	choosing	g to file under	■ Chapt	er 7				
			☐ Chapt	er 11				
			☐ Chapt	er 12				
			☐ Chapt	er 13				
8.	How you	will pay the fee	abo ord	out how your er. If your	ou may pay. Typid	cally, if you are paying the fee y	ck with the clerk's office in your local court for ourself, you may pay with cash, cashier's che lalf, your attorney may pay with a credit card of	ck, or money
						Illments. If you choose this opti (Official Form 103A).	on, sign and attach the Application for Individ	uals to Pay
			☐ I re	quest that	at my fee be waiv juired to, waive yo	ved (You may request this option or fee, and may do so only if you	n only if you are filing for Chapter 7. By law, a our income is less than 150% of the official po	verty line that
							n installments). If you choose this option, you cial Form 103B) and file it with your petition.	must fill out
9.		ı filed for	■ No.					
	bankrup last 8 yea	cy within the	☐ Yes.					
	,			District		When	Case number	
				District		When	Casa number	
				District		When	Case number	
10.		oankruptcy	■ No					
	filed by a		☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.	Do you r	ent your	■ No.	Go to	line 12.			
	residenc	e?	☐ Yes.	Has vo	our landlord obtai	ned an eviction judgment again	st vou?	
			□ 165.		No. Go to line 1	, 0	,	
							Judgment Against You (Form 101A) and file i	t as part of
					this bankruptcy		JaagJr. Agamor 100 (10111 1011) alla illo i	. ao part or

Dec	otor 2 Jeannine Maureer	n Lancas	ter	Case number (if known)
ar	t 3: Report About Any Bu	sinesses	You Own as a Sole Prop	prietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of	business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	any
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City,	State & ZIP Code
	it to this petition.		Check the appropriate	e box to describe your business:
	·			usiness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset F	Real Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (a	as defined in 11 U.S.C. § 101(53A))
			☐ Commodity B	oker (as defined in 11 U.S.C. § 101(6))
			☐ None of the al	pove
	Chapter 11 of the Bankruptcy Code and are you a small business debtor?	operatior in 11 U.S	ns, cash-flow statement, a S.C. 1116(1)(B).	are a small business debtor, you must attach your most recent balance sheet, statement of nd federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	No.	I am not filing under C	Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chap Code.	oter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chap	oter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardous Property or	Any Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed	₫?
	For example, do you own		,	
	perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	urgent repairs?			Number, Street, City, State & Zip Code

Debtor 1 Howard Wilbur Lancaster
Debtor 2 Jeannine Maureen Lancaster

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 Howard Wilbur La Jeannine Mauree		ter		Case numbe	「 (if known)
Par	t 6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily individual primarily for a pe			ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.	•		
			Yes. Go to line 17.			
		16b.	Are your debts primarily money for a business or in			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consu	mer debts or busines	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapt	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7 are paid that funds will be a			erty is excluded and administrative expenses
	administrative expenses are paid that funds will		■ No			
	be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do	1 -49		1 ,000-5,000)	☐ 25,001-50,000
	you estimate that you owe?	☐ 50-99	1	5001-10,00		5 0,001-100,000
	owe.	□ 100-1 □ 200-9		□ 10,001-25,0	000	☐ More than100,000
19.	How much do you estimate your assets to	□ \$0 - \$		□ \$1,000,001		□ \$500,000,001 - \$1 billion
	be worth?		01 - \$100,000		1 - \$50 million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million		01 - \$500 million	☐ More than \$50 billion
20.	How much do you	□ \$0 - \$		□ \$1,000,001		□ \$500,000,001 - \$1 billion
	to be?		001 - \$100,000		1 - \$50 million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million	_	01 - \$500 million	☐ More than \$50 billion
Par	t 7: Sign Below					
	you	I have ex	camined this petition, and I d	eclare under penalty of	perjury that the inform	nation provided is true and correct.
						under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.
			rney represents me and I did nt, I have obtained and read			t an attorney to help me fill out this
		I request	relief in accordance with the	e chapter of title 11, Unit	ed States Code, spec	cified in this petition.
			cy case can result in fines up			r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
			ard Wilbur Lancaster		/s/ Jeannine Maure	
			d Wilbur Lancaster e of Debtor 1		Jeannine Maure Signature of Debtor	
		Executed	d on September 9, 201	9	Executed on Ser	otember 9, 2019

Debtor 1	Howard Wilbur Lancaster		
Debtor 2	Jeannine Maureen Lancaster	Case number (if known)	
	•		

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Cynthia S. Daugherty	Date	September 9, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Cynthia S. Daugherty 0086414		
Printed name		
Daugherty Law		
Firm name		
8686 Winton Road		
Cincinnati, OH 45231		
Number, Street, City, State & ZIP Code		
Contact phone 513-484-9486	Email address	debtreliefsoon@gmail.com
0086414 OH		
Bar number & State		

Fill i	n this information to identify your case:		
Debt			
Dobt	First Name Middle Name Last Name		
Debt	or 2 Jeannine Maureen Lancaster		
(Spou	se if, filing) First Name Middle Name Last Name		
Unite	d States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO		
Case	number		
(if kno		_	k if this is an
		amer	nded filing
Off	cial Form 106Sum		
	nmary of Your Assets and Liabilities and Certain Statistical Information		12/15
infori	complete and accurate as possible. If two married people are filing together, both are equally responsible for nation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. Summarize Your Assets		
rait		Your a	assets of what you own
		raido	or innat you om:
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	114,350.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	15,594.50
	1c. Copy line 63, Total of all property on Schedule A/B	\$	129,944.50
Part	2: Summarize Your Liabilities		
			iabilities nt you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	296,323.06
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	45,075.10
	Your total liabilities	\$	341,398.16
Part	3: Summarize Your Income and Expenses		
	·		
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,150.55
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,061.32
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
0.	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other so	hedules.
	■ Yes		
7.	What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules. Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

609.55

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	mation to identify	your case and th	nis filing:			
Debtor 1		our Lancaster	Č			
Debtor 2	First Name	Middle aureen Lancast	e Name Last Name			
(Spouse, if filing)	First Name		e Name Last Name			
United States B	ankruptcy Court for	the: SOUTHER	N DISTRICT OF OHIO			
Case number					[☐ Check if this is ar amended filing
Schedu n each category, hink it fits best.	Be as complete and a	coperty escribe items. List	an asset only once. If an asset fits in more than one is the contract of the c	are equally respon	sible for sup	plying correct
nswer every que	estion.	·	heet to this form. On the top of any additional pag ther Real Estate You Own or Have an Interest In	ges, write your nan	ne and case i	number (if known).
☐ No. Go to Pa	art 2.					
Yes. Where	is the property?					
1.1	is the property?		What is the property? Check all that apply			
1.1 5471 Co u		cription	What is the property? Check all that apply ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative	the amount of	any secured	ns or exemptions. Put claims on <i>Schedule D:</i> s <i>Secured by Property.</i>
5471 Cou Street address	is the property? urier Court s, if available, or other des	45238-0000	■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land	the amount of Creditors Who	any secured of Have Claims e of the ty?	claims on Schedule D: s Secured by Property. Current value of the portion you own?
5471 Cou	is the property? urier Court s, if available, or other des		■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare	Current value entire proper \$114,	any secured of Have Claims e of the ty? 350.00	claims on Schedule D: s Secured by Property. Current value of the portion you own?
5471 Cou Street address	is the property? urier Court s, if available, or other des	45238-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	Current value entire proper \$114, Describe the (such as fee a life estate),	any secured of Have Claims e of the ty? 350.00 nature of you simple, tenar if known.	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$114,350.00 ur ownership interest
5471 Cou Street address Cincinna City	urier Court s, if available, or other des	45238-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Debtor 1 only	Current value entire proper \$114, Describe the (such as fee s	any secured of Have Claims e of the ty? 350.00 nature of you simple, tenar if known.	claims on Schedule D: Secured by Property. Current value of the portion you own? \$114,350.00
1.1 5471 Cou Street address Cincinna City Hamilton	urier Court s, if available, or other des	45238-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value entire proper \$114, Describe the (such as fee a life estate),	any secured of Have Claims e of the ty? 350.00 nature of you simple, tenar if known.	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$114,350.00 ur ownership interest
5471 Cou Street address Cincinna City	urier Court s, if available, or other des	45238-0000	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Other Debtor 1 only	Current value entire proper \$114, Describe the (such as fee a life estate), Fee simple	any secured of Have Claims e of the ty? ,350.00 nature of you simple, tenar if known.	claims on Schedule D: s Secured by Property. Current value of the portion you own? \$114,350.00 ur ownership interest

Official Form 106A/B Schedule A/B: Property page 1

		Howard Wil Jeannine M				Cas	se number (if known)	
	If you	own or have	more	than one, li	st here:			
1.2	,			,		t is the property? Check all that apply		
		ollier Drive			□	Single-family home		d claims or exemptions. Put
	Street add	dress, if available, o	or other des	scription		Duplex or multi-unit building		cured claims on Schedule D: Claims Secured by Property.
						Condominium or cooperative		, , , , , , , , , , , , , , , , , , , ,
					П	Manufactured or mobile home		
	Sevier	ville	TN	37862-000)0 _		Current value of the	Current value of the
	City	VIIIC	State	ZIP Code			entire property? Unknowi	portion you own? 1 Unknown
	City		State	ZIF Code		Investment property Timeshare	Ulkilowi	
					_	Other		of your ownership interest
					_		 (such as fee simple, a life estate), if know 	tenancy by the entireties, or
					Who	has an interest in the property? Check one Debtor 1 only	Joint tenant	
	Sevier	•			_	, ,		
	County					· · · · · ·		
	County					Debtor 1 and Debtor 2 only		community property
					Otho	At least one of the debtors and another	(see instructions)	
						r information you wish to add about this it erty identification number:	em, such as local	
	ou own,		e legal			ny vehicles, whether they are registe Schedule G: Executory Contracts and U.		y vehicles you own that
	ars, vans No Yes	s, trucks, trac	etors, sp	oort utility vel	nicles, moto	orcycles		
3.1	Make:	Honda			Who has a	n interest in the property? Check one		d claims or exemptions. Put cured claims on Schedule D:
	Model:	HRV			☐ Debtor	1 only		Claims Secured by Property.
	Year:	2018			☐ Debtor	2 only	Current value of the	Current value of the
	Approx	kimate mileage:		12000	Debtor	1 and Debtor 2 only	entire property?	portion you own?
		information:			☐ At least	one of the debtors and another		
		y interest or	nly due	to lease	п		\$0.0	0 \$0.00
	paym	ients				if this is community property tructions)	Ψο.ο.	, vo.oo
Ex □	No Yes Add the cages yo	Boats, trailers	, motors f the po led for I	rtion you ow Part 2. Write t	tercraft, fishi n for all of y hat number	reational vehicles, other vehicles, and ng vessels, snowmobiles, motorcycle action of the control of the contro	ccessories y entries for	\$0.00
						of the following items?		Current value of the portion you own? Do not deduct secured

Debt Debt			our Lancaster ureen Lancaster	Case number (if kn	own)
<i>E</i>	xample No	old goods and f es: Major applian Describe	urnishings ces, furniture, linens, china, kitchenware		claims or exemptions.
			kitchen table and chairs, living room set, chairs, lamps, sofa table, plant stand, floor lamp, table la refridgerator, 2 bedroom sets, washer and dryer, pans, 2 wall mirrors, 5 metal outdoor chairs.	mp, hamper,	\$972.50
E	l No	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; compu phones, cameras, media players, games	ters, printers, scanners; mu	sic collections; electronic devices
			one television,		\$0.00
9. E c	ixample I _{No} I Yes. quipme	other collection Describe ent for sports as	graphic, exercise, and other hobby equipment; bicycles, pool		
	Yes.	Describe	photography equipment 40 years old - used in La Photography appraised by K&R Photo Equipment 859-341-6986 Bogen lightshed, lightstand, photoflex backdrop backdrop stand, crossbar/backdrop, 3 Bronica tri umbrella, Bronica tripod bags, 3 battery chargers Solegor Lens, 4 Bronica 50mm lens, 5 Bronica 75 Bronica 150mm lens, 4 Bronica cameras, 6 Bronic Bronica Focusing rings, 2 Nikon sleves, 2 belts w battery, 1 Virvitar 283 Flash, 2 Vignette Boxes, 2 Cable releases, 2 close up lens	stand, Ideal co pods, photoflex , 2 alum cases, mm lens, 3 ca slides, 6 rith strap, 1 Metz	\$260.00
11. (No Yes. Clothe: Examp	oles: Pistols, rifles Describe	s, shotguns, ammunition, and related equipment othes, furs, leather coats, designer wear, shoes, accessories		\$200.00
_	No		welry, costume jewelry, engagement rings, wedding rings, hei	rloom jewelry, watches, ge	ms, gold, silver

Debtor 2		ur Lancaster ureen Lancaster		Case number (if known)
	-farm animals amples: Dogs, cats, b	oirds, horses			
■ Ye	es. Describe				
		one dog			\$0.00
■ No	-	-	d not already list, including ar	ny health aids you did not list	
			Part 3, including any entries f		\$1,432.50
	Describe Your Finance		in any of the fallowing		Comment value of the
Do you	own or nave any le	egal or equitable interest	in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	<i>amples:</i> Money you h	nave in your wallet, in your		d on hand when you file your peti	tion
Exa	institutions. I		counts; certificates of deposit; slats with the same institution, list of list	hares in credit unions, brokerage each.	houses, and other similar
		17.1. Checking	PNC Bank		\$1,000.00
		or publicly traded stocks	prokerage firms, money market a	accounts	
■ No	•	miredinent decodine with t	ronorago ilimo, monoy mamor e	a de la constanta de la consta	
□ Ye	es	Institution or issue	er name:		
join	nt venture	ock and interests in incor	porated and unincorporated b	ousinesses, including an intere	est in an LLC, partnership, and
■ No		ormation about them Name of entity:		% of ownership:	
Neg	gotiable instruments n-negotiable instrume	include personal checks, c	gotiable and non-negotiable in ashiers' checks, promissory note transfer to someone by signing o	es, and money orders.	
□ Ye	es. Give specific info	rmation about them Issuer name:			
	•		, 403(b), thrift savings accounts,	or other pension or profit-sharing	g plans
■ Ye	es. List each account	t separately. Type of account:	Institution name:		
		Pension	RJ Reynolds Pensi	on	\$0.00

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1 Howard Wilbur Lancaster
Debtor 2 Jeannine Maureen Lancaster

401(k)

Case number (if known)

Wells Fargo - Novelart Manufacturing

		40 I(IV)	retirement		\$2,500.00
22	Examples: Agreeme	nd prepayments used deposits you have made so the ents with landlords, prepaid rent, pu			companies, or others
	■ No □ Yes		Institution name	or individual:	
23	Annuities (A contract No	ct for a periodic payment of money	to you, either for life	or for a number of years)	
	☐ Yes	Issuer name and description.			
24		ation IRA, in an account in a qua 1), 529A(b), and 529(b)(1).	lified ABLE progra	m, or under a qualified state tui	tion program.
	☐ Yes	Institution name and description.	Separately file the re	cords of any interests.11 U.S.C. §	§ 521(c):
25	Trusts, equitable on No	future interests in property (oth	er than anything lis	ted in line 1), and rights or pow	vers exercisable for your benefit
	☐ Yes. Give specific	information about them			
26		s, trademarks, trade secrets, and domain names, websites, proceeds			
	☐ Yes. Give specific	information about them			
27		es, and other general intangibles permits, exclusive licenses, cooper	ative association ho	dings, liquor licenses, professiona	al licenses
	☐ Yes. Give specific	information about them			
M	oney or property owe	ed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	. Tax refunds owed t	o vou			·
20	■ No	o you			
	☐ Yes. Give specific	information about them, including v	vhether you already	filed the returns and the tax years	S
29	Family support Examples: Past due No ☐ Yes. Give specific	or lump sum alimony, spousal sup	port, child support, r	naintenance, divorce settlement,	property settlement
30	benefits;	neone owes you vages, disability insurance paymen unpaid loans you made to someor		, sick pay, vacation pay, workers	compensation, Social Security
	■ No □ Yes. Give specific	information			
31	. Interests in insuran Examples: Health, c □ No	ce policies lisability, or life insurance; health sa	avings account (HSA); credit, homeowner's, or renter's	s insurance
		urance company of each policy and Company name:	d list its value.	Beneficiary:	Surrender or refund value:

Debtor 1 Debtor 2	Howard Wilbur Lancas Jeannine Maureen Lan		Case number (if known)	
	policy	America Whole life insurance	Jeannine Lancaster - wife	\$1,434.50
If you some ID No		e you from someone who has died rust, expect proceeds from a life insuranc	e policy, or are currently entitled to rec	eive property because
		401 Fairbanks Avenue, Cincinna major repairs (holes in roof, leal driveway sidewall needs replace	s in the basement and	\$9,227.50
Exam ■ No		ner or not you have filed a lawsuit or ma lisputes, insurance claims, or rights to sue		
■ No	contingent and unliquidated Describe each claim	claims of every nature, including coun	terclaims of the debtor and rights to	o set off claims
■ No	nancial assets you did not all. Give specific information	ready list		
		r entries from Part 4, including any entr		\$14,162.00
Part 5: De	escribe Any Business-Related Pr	operty You Own or Have an Interest In. List	any real estate in Part 1.	
■ No. G	own or have any legal or equital o to Part 6. Go to line 38.	ole interest in any business-related property	?	
Part 6: De	escribe Any Farm- and Commerc you own or have an interest in farm	ial Fishing-Related Property You Own or Ha lland, list it in Part 1.	ve an Interest In.	
	u own or have any legal or e . Go to Part 7.	quitable interest in any farm- or comme	ercial fishing-related property?	
☐ Ye	s. Go to line 47.			
Part 7:	Describe All Property You Ow	n or Have an Interest in That You Did Not Li	st Above	
	u have other property of any ples: Season tickets, country c	kind you did not already list? lub membership		
	Give specific information			
54. Add	the dollar value of all of you	r entries from Part 7. Write that number	here	\$0.00

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1	Howard Wilbur Lancaster
Debtor 2	Jeannine Maureen Lancaster

Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$114,350.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$1,432.50 58. Part 4: Total financial assets, line 36 \$14,162.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... \$15,594.50 Copy personal property total 62. \$15,594.50

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$129,944.50

page 7

Debtor 1	Howard Wilbur La	ancaster		
	First Name	Middle Name	Last Name	
Debtor 2	Jeannine Mauree	n Lancaster		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				Check if this is an amended filing
Official Fo	orm 106C			
		operty You C	Claim as Exempt	4/1

needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited

	the applicable statutory amount. Int 1: Identify the Property You Claim as E	xempt			
	Which set of exemptions are you claiming		n if yo	ur spouse is filing with you.	
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	i.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Check only one box for each exemption. Schedule A/B			
	5471 Courier Court Cincinnati, OH 45238 Hamilton County	\$114,350.00		\$290,850.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(1)
	kitchen table and chairs, living room	\$972.50		\$972.50	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
set, chairs, TV cabinet, 2 lamps, sofa table, plant stand, floor lamp, table lamp, hamper, refridgerator, 2 bedroom sets, washer and dryer, dishes, pots and pans, 2 wall mirrors, 5 metal outdoor chairs. Line from Schedule A/B: 6.1				100% of fair market value, up to any applicable statutory limit	2329.00(A)(4)(a)
	photography equipment 40 years old - used in Lanscaster Photography	\$260.00		\$260.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
	appraised by K&R Photo Equipment 859-341-6986 Bogen lightshed, lightstand, photoflex backdrop stand, Ideal co backdrop stand, crossbar/backdrop, 3 Bronica tripods, photoflex umbrella, Br Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit	2020.00(F)(10)

Debtor 1 Howard Wilbur Lancaster Debtor 2 Jeannine Maureen Lancaster			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
normal wearing apparel Line from Schedule A/B: 11.1	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Ellie IIdiii denedale PVB. 1111			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(u)
Checking: PNC Bank Line from Schedule A/B: 17.1	\$1,000.00		\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
Life from Schedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)
Pension: RJ Reynolds Pension Line from Schedule A/B: 21.1	\$0.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(10)(b)
Line from Schedule Arb. 21.1			100% of fair market value, up to any applicable statutory limit	2329.00(A)(10)(b)
401(k): Wells Fargo - Novelart Manufacturing retirement	\$2,500.00		\$2,500.00	Ohio Rev. Code Ann. § 2329.66(A)(10)(d)
Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	2323.00(A)(10)(u)
TransAmerica Whole life insurance policy	\$1,434.50		\$1,434.50	Ohio Rev. Code Ann. §§ 2329.66(A)(6)(b), 3911.10,
Policy # 60082403 Beneficiary: Jeannine Lancaster - wife Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	3911.12, 3911.14

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

П №

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

■ No

☐ Yes

Fill	in this informa	tion to identify you	ır case:			
Deb	tor 1	Howard Wilbur	Lancaster Middle Name Last Name			
Dob	tor 2					
	use if, filing)	Jeannine Maure	Middle Name Last Name			
Unit	ed States Bank	ruptcy Court for the:	SOUTHERN DISTRICT OF OHIO			
Cas (if kno	e number				_	t if this is an ded filing
	icial Form hedule D		Who Have Claims Secure	ed by Propert	V	12/15
Be as	complete and a	ccurate as possible.	If two married people are filing together, both are eout, number the entries, and attach it to this form.	equally responsible for su	upplying correct informa	
1. Do	any creditors ha	ave claims secured by	your property?			
	☐ No. Check th	nis box and submit tl	nis form to the court with your other schedules.	You have nothing else t	o report on this form.	
	Yes. Fill in a	II of the information	below.	-		
Part	List All	Secured Claims		0-1	Onlyman D	0-1
for e	ach claim. If more	e than one creditor has	nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Cenlar Fede	eral Savings &	Describe the property that secures the claim:	\$137,099.13	\$114,350.00	\$22,749.13
	Creditor's Name		5471 Courier Court Cincinnati, OH 45238 Hamilton County			
	POB 77404 Trenton, NJ	J 08628	As of the date you file, the claim is: Check all that apply.			
	Number, Street, C	ity, State & Zip Code	☐ Unliquidated			
			☐ Disputed			
_	owes the debt	? Check one.	Nature of lien. Check all that apply.			
_	Debtor 1 only		An agreement you made (such as mortgage or so car loan)	ecured		
_	Debtor 2 only		_ ′			
_	Debtor 1 and Debt	•	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	it least one of the	debtors and another	☐ Uther (including a right to offset) First Mort	anana		
	community debt		Other (including a right to offset)	3~3~		

Date debt was incurred 2007

Last 4 digits of account number

6670

Debtor 1 Howard Wilbur Lancast		Case number (if known)		
Debtor 2 Jeannine Maureen Land First Name Middle N				
State of Ohio Department of Taxation	Describe the property that secures the claim:	\$41,596.89	\$114,350.00	\$41,596.89
Creditor's Name	5471 Courier Court Cincinnati, OH 45238 Hamilton County]		
POB 530	43236 Hamilton County			
Columbus, OH 43216-0530	As of the date you file, the claim is: Check all that apply. Contingent	_		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Tax Lien	1		
Date debt was incurred 11/27/2006	Last 4 digits of account number	8		
2.3 State of Ohio Department of Taxation	Describe the property that secures the claim:	\$842.70	\$114,350.00	\$842.70
Creditor's Name	5471 Courier Court Cincinnati, OH 45238 Hamilton County			
POB 530 Columbus, OH 43216-0530	As of the date you file, the claim is: Check all that apply. Contingent	J		
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)	secureu		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Tax Lien	1		
Date debt was incurred 8/18/2008	Last 4 digits of account number 278	n		

Debtor 1 Howard Wilbur Lancast	· 	Case number (if known)		
First Name Middle N				
Debtor 2 Jeannine Maureen Land First Name Middle N				
First Name Middle N	lame Last Name			
State of Ohio Department				
of Taxation	Describe the property that secures the claim:	\$4,947.24	\$114,350.00	\$4,947.24
Creditor's Name	5471 Courier Court Cincinnati, OH			
	45238 Hamilton County			
POB 530	As of the data was file the plain in the state of			
Columbus, OH	As of the date you file, the claim is: Check all that apply.			
43216-0530	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or see	cured		
■ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset) Tax Lien			
community debt				
Date debt was incurred 8/18/2008	Last 4 digits of account number 2770			
Date debt was incurred 8/18/2008	Last 4 digits of account number 2770		****	• • • • • • • • • • • • • • • • • • • •
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation	Last 4 digits of account number 2770 Describe the property that secures the claim:	\$10,553.81	\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 State of Ohio Department	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH	\$10,553.81	\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name	Describe the property that secures the claim:	\$10,553.81	\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name POB 530	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County	\$10,553.81	\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply.	\$10,553.81	\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. □ Contingent	\$10,553.81	\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply.	\$10,553.81	\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$10,553.81	\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code Who owes the debt? Check one.	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.		\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or see		\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code Who owes the debt? Check one.	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.		\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or see		\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secar loan)		\$114,350.00	\$10,553.81
Date debt was incurred 8/18/2008 2.5 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secar loan) Statutory lien (such as tax lien, mechanic's lien)		\$114,350.00	\$10,553.81

Debtor 1 Howard Wilbur Lancast		se number (if known)		
First Name Middle N				
Debtor 2 Jeannine Maureen Land				
First Name Middle N	ame Last Name			
State of Ohio Department				
of Taxation	Describe the property that secures the claim:	\$854.53	\$114,350.00	\$854.53
Creditor's Name	5471 Courier Court Cincinnati, OH			
	45238 Hamilton County			
POB 530	_			
Columbus, OH	As of the date you file, the claim is: Check all that apply.			
43216-0530	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secur	red		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a				
community debt	Other (including a right to offset)			
Date debt was incurred 8/18/2008	Last 4 digits of account number 2864			
State of Ohio Department	<u> </u>		\$444.0E0.00	\$047.40
2.7 State of Ohio Department of Taxation	Describe the property that secures the claim:	\$947.18	\$114,350.00	\$947.18
2 7 State of Ohio Department	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH	\$947.18	\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name	Describe the property that secures the claim:	\$947.18	\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name POB 530	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH	\$947.18	\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply.	\$947.18	\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. □ Contingent	\$947.18	\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated	\$947.18	\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$947.18	\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code Who owes the debt? Check one.	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.		\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secure		\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code Who owes the debt? Check one.	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secure car loan)		\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secure		\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secure car loan)		\$114,350.00	\$947.18
2.7 State of Ohio Department of Taxation Creditor's Name POB 530 Columbus, OH 43216-0530 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the property that secures the claim: 5471 Courier Court Cincinnati, OH 45238 Hamilton County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secure car loan) Statutory lien (such as tax lien, mechanic's lien)		\$114,350.00	\$947.18

Debtor 1 Howard Wilbur Lancast		Case number (if known)		
First Name Middle N				
Debtor 2 Jeannine Maureen Land				
First Name Middle N	lame Last Name			
State of Ohio Department				
2.8 State of Ohio Department of Taxation	Describe the property that secures the claim:	\$922.11	\$114,350.00	\$922.11
Creditor's Name	5471 Courier Court Cincinnati, OH			*******
ordano, o riamo	45238 Hamilton County			
POB 530	43236 Hammon County			
Columbus, OH	As of the date you file, the claim is: Check all that			
43216-0530	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who awas the debt2 of	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	An agreement you made (such as mortgage or so	ecured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset) Tax Lien			
community debt				
Date debt was incurred 8/18/2008	Last 4 digits of account number 2803			
State of Ohio Department				
of Taxation	Describe the property that secures the claim:	\$984.87	\$114,350.00	\$984.87
Creditor's Name	5471 Courier Court Cincinnati, OH			
	45238 Hamilton County			
POB 530				
Columbus, OH	As of the date you file, the claim is: Check all that apply.			
43216-0530	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
, , , , , , , , , , , , , , , , , , ,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or se	ecured		
_	car loan)	coured		
Debtor 2 only	_			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
community door				
Date debt was incurred 8/18/2008	Last 4 digits of account number 2797			

Debtor 1 Howard Wilbur Lancast	er	Case number (if known)			
First Name Middle N	ame Last Name				
Debtor 2 Jeannine Maureen Lanc					
First Name Middle N	ame Last Name				
2.1 State of Ohio Department					
of Taxation	Describe the property that secures the claim:	\$950.12	\$114,350.00	\$950.12	
Creditor's Name	5471 Courier Court Cincinnati, OH 45238 Hamilton County				
POB 530	As of the date you file, the claim is: Check all that				
Columbus, OH	apply.				
43216-0530	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortgage or	secured			
■ Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset) Tax Lien				
Date debt was incurred 8/18/2008	Last 4 digits of account number 279	4			
2.1 State of Ohio Department of Taxation	Describe the property that secures the claim:	\$44,697.71	\$114,350.00	\$44,697.71	
Creditor's Name	5471 Courier Court Cincinnati, OH 45238 Hamilton County				
POB 530	As of the date you file, the claim is: Check all that				
Columbus, OH 43216-0530	apply.				
	Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
Who are the debto of	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset) Tax Lien				
Date debt was incurred 10/12/2011	Last 4 digits of account number 073	8			

Debtor 1 Howard Wilbur Lancast		Case number (if known)		
First Name Middle N				
Debtor 2 Jeannine Maureen Land First Name Middle N				
2.1 State of Ohio Department of Taxation	Describe the property that secures the claim:	\$44,697.71	\$114,350.00	\$44,697.71
Creditor's Name	5471 Courier Court Cincinnati, OH 45238 Hamilton County			
POB 530 Columbus, OH 43216-0530	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	ecured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Tax Lien			
Date debt was incurred 2/16/2012	Last 4 digits of account number 3495			
2.1 State of Ohio Department of Taxation	Describe the property that secures the claim:	\$6,318.15	\$114,350.00	\$6,318.15
Creditor's Name	5471 Courier Court Cincinnati, OH 45238 Hamilton County			
POB 530 Columbus, OH 43216-0530	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	ecured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Tax Lien			

Debte	or 1 Howar	d Wilbur Lancas	ter			Case no	umber (if known)		
	First Name	e Middle N	lame	Last Name	_				
Debte		ne Maureen Lan			_				
	First Name	e Middle N	lame	Last Name					
	0								
		nio Department	Docaribo t	he property that secures	the eleims		\$910.91	\$114,350.00	\$910.91
-	of Taxation Creditor's Name	<u> </u>		• • •		¬ —	ΨΟΙΟΙΟΙ –	Ψ11 4,000.00 –	Ψ010.01
	Orealtor 3 Harrie			urier Court Cincinn	ati, OH				
	POB 530		43230 F	lamilton County					
		OΠ	As of the c	late you file, the claim is:	Check all tha	t			
	Columbus, 43216-0530		apply.						
-			☐ Conting	•					
	Number, Street, 0	City, State & Zip Code	Unliquid						
			☐ Dispute						
_	owes the deb	t? Check one.		lien. Check all that apply.					
	ebtor 1 only			eement you made (such as	mortgage o	r secured			
☐ De	ebtor 2 only		car loa	n)					
■ De	ebtor 1 and Deb	otor 2 only	☐ Statutor	ry lien (such as tax lien, me	chanic's lier	n)			
☐ At	least one of the	e debtors and another	☐ Judgme	ent lien from a lawsuit					
	neck if this clai	im relates to a	Other (i	ncluding a right to offset)	Tax Lie	n			
		•							
Date	debt was incur	rred 8/27/2014	Las	t 4 digits of account num	ber 344	48			
Add	I the dollar val	ue of your entries in (Column A on	this page. Write that num	ber here:		\$296,323.	06	
			the dollar va	alue totals from all pages	•		\$296,323.		
Wri	te that number	here:				L	φ 2 90,323.	00	
Part	2: List Othe	ers to Be Notified fo	or a Debt Th	nat You Already Listed	ļ				
Use t	his page only i	f vou have others to I	oe notified ab	out your bankruptcy for	a debt that	vou already	v listed in Part 1. Fo	r example, if a collection	agency is
trying	to collect from	n you for a debt you	owe to some	one else, list the creditor	in Part 1, a	nd then list	the collection agen	icy here. Similarly, if you	have more
				n Part 1, list the additiona	al creditors	here. If you	ı do not have additi	onal persons to be notifi	ed for any
aepts	iii Part 1, 00 r	not fill out or submit t	nis page.						
	Name Numbe	er, Street, City, State &	Zin Code		_		5		
		yment processin	•		On	which line in	n Part 1 did you ente	r the creditor? 2.1	
	POB 1173		g 30		l as	st 4 digits of	account number		
	Newark, N	~			Luc	digito oi			
	•								

Fill in t	his informa	ation to identify your	case:					
Debtor	1	Howard Wilbur La	incaster Middle Nam	e	Last Name		_	
Debtor 2	2	Jeannine Mauree						
(Spouse if		First Name	Middle Nam	ie	Last Name		_	
United S	States Bank	cruptcy Court for the:	SOUTHERN I	DISTRICT OF OHI	0		_	
Case nu (if known)							_	theck if this is an mended filing
Officia	al Form	106F/F						
		F: Creditors W	ho Have I	Insecured (Claims			12/15
any exec Schedule Schedule left. Attac	utory contra G: Executo D: Creditor ch the Contir	cts or unexpired leases ry Contracts and Unexp	that could result ired Leases (Officured by Property.	in a claim. Also list cial Form 106G). Do . If more space is ne	t executory on not include a eeded, copy t	ontracts on Schedule any creditors with par he Part you need, fill	A/B: Property (Offici tially secured claims it out, number the en	that are listed in tries in the boxes on the
Part 1:	List All	of Your PRIORITY Un	secured Claim	s				
1. Do a	any creditors	have priority unsecure	d claims against	you?				
■ N	No. Go to Par	t 2.						
	es.							
Part 2:	List All	of Your NONPRIORIT	Y Unsecured C	laims				
3. Do a	any creditors	have nonpriority unsec	ured claims agai	nst you?				
	No. You have	nothing to report in this pa	art. Submit this for	m to the court with yo	our other sche	dules.		
■ Y	es.							
unse	ecured claim, one creditor	onpriority unsecured classifies the creditor separately holds a particular claim, li	for each claim. F	or each claim listed, i	identify what t	ype of claim it is. Do no	t list claims already inc	luded in Part 1. If more
								Total claim
4.1	Capital O	ne	L	ast 4 digits of accou	unt number	1049		\$679.00
	. ,	Creditor's Name				0/0000		·
	Henrico,	pital One Drive	V	hen was the debt in	ncurred?	9/2008		-
-		et City State Zip Code	A	s of the date you file	e, the claim i	s: Check all that apply		
		ed the debt? Check one.						
	Debtor 1	only		Contingent				
	Debtor 2	only		Unliquidated				
	Debtor 1	and Debtor 2 only		Disputed				
		one of the debtors and and		ype of NONPRIORIT	ΓY unsecured	l claim:		
	☐ Check if	this claim is for a comr	_{nunity} [Student loans				
	debt		Ĺ	0 0		ration agreement or div	orce that you did not	
		subject to offset?		eport as priority claim				
	■ No		L			g plans, and other simil	ar debts	
	☐ Yes			Other. Specify C	redit card	purchases		

	1 Howard Wilbur Lancaster2 Jeannine Maureen Lancaster	Case number (if known)	
4.2	Charter Communications	Last 4 digits of account number	\$275.11
	Nonpriority Creditor's Name 12405 Powerscourt Drive Saint Louis, MO 63131	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify telephone services	
4.3	Duke Nonpriority Creditor's Name	Last 4 digits of account number 8213	\$717.78
	POB 1327 Charlotte, NC 28201-1327	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify utilites	
	Cuardian Alarm Campany	Last 4 digits of account number	£426.40
4.4	Guardian Alarm Company Nonpriority Creditor's Name	Last 4 digits of account number	\$126.40
	75 Remittance Drive Dept 1376	When was the debt incurred?	
	Chicago, IL 60675		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	Contingent	
	_	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify alarm system	

	Howard Wilbur Lancaster Jeannine Maureen Lancaster		Case number (if known)	
4.5	Kohl's/Capital One	Last 4 digits of account number	5xxx	\$2,179.00
	Nonpriority Creditor's Name POB 3115 Milwaukee, WI 53201-3115	When was the debt incurred?	12/2008	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.6	Mercy Medical Transportation Nonpriority Creditor's Name	Last 4 digits of account number		\$54.00
	25250 W. 8 Mile Road Southfield, MI 48033	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical tra	nsportation	
4.7	PNC Bank Nonpriority Creditor's Name	Last 4 digits of account number	2637	\$17,523.00
	1 Financial Pkwy Kalamazoo, MI 49009	When was the debt incurred?	9/2015	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card	purchases	

Debtor Debtor	Howard Wilbur Lancaster Jeannine Maureen Lancaster		Case number (if known)	
4.8	PNC Bank	Last 4 digits of account number	2629	\$13,109.00
	Nonpriority Creditor's Name	When was the debt incurred?	E/2016	
	1 Financial Pkwy Kalamazoo, MI 49009	when was the debt incurred?	5/2016	
-	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.9	Spectrum	Last 4 digits of account number		\$275.11
	Nonpriority Creditor's Name POB 1060 Carol Stream, IL 60132	When was the debt incurred?		
-	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify cable servi	ces	
4.1	Sprint Nextel	Last 4 digits of account number		\$190.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept	When was the debt incurred?		
	POB 7949 Overland Bark, KS 66207			
-	Overland Park, KS 66207 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	• ,		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	

☐ Yes

Other. Specify cell phone services

Debto Debto	r 1 Howard Wilbur Lancaster r 2 Jeannine Maureen Lancaster		Case number (if known)	
4.1 1	Synchrony Bank/Care Credit	Last 4 digits of account number	8xxx	\$686.00
	Nonpriority Creditor's Name Attn: Bankruptcy Department POB 965061 Orlando, FL 32896-5061	When was the debt incurred?	4/2012	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit card		
4.1	Synchrony Bank/TJX Nonpriority Creditor's Name	Last 4 digits of account number	3401	\$3,924.00
	Attn: Bankruptcy Department POB 965061 Orlando, FL 32896-5061	When was the debt incurred?	7/2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	- ·	
	Yes	Other. Specify Credit card	purchases	
4.1	The Christ Hospital Nonpriority Creditor's Name	Last 4 digits of account number	multiple accounts	\$149.33
	POB 635904 Cincinnati, OH 45263	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical tre	atment	

Debtor Debtor	1 Howard Wilbur Lancaster 2 Jeannine Maureen Lancaster		Case number (if known)	
4.1	The Family Medical Group	Last 4 digits of account number	multiple account	\$480.00
	Nonpriority Creditor's Name 6331 Glenway Avenue Cincinnati, OH 45211	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify medical tre	atment	
4.1 5	The Home Depot/CBNA	Last 4 digits of account number	0129	\$1,981.37
	Nonpriority Creditor's Name POB 6497 Sioux Falls, SD 57117	When was the debt incurred?	7/2007	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.1	Tuille alsh		multiple	£4 C02 00
6	TriHealth Nonpriority Creditor's Name	Last 4 digits of account number	accounts	\$1,683.00
	619 Oak Street Cincinnati, OH 45206	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical tre	atment	

Debt	or 2 Jeannine Maureen Lancaster	Case number (if known)	
4.1 7	UC Health	Last 4 digits of account number	\$800.00
	Nonpriority Creditor's Name POBox 630861	When was the debt incurred?	
	Cincinnati, OH 45263 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify hearing testing	
4.1	Verizon	Last 4 digits of account number	\$243.00
8	Nonpriority Creditor's Name	Last 4 digits of account number	ΨΣ-10.00
	POB 25505 Lehigh Valley, PA 18002-5505	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify cell phone	
is to have not Name Ame POE	this page only if you have others to be notified the rying to collect from you for a debt you owe to	a about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. hat you listed in Parts 1 or 2, list the additional creditors here. If you do not have additiona	Similarly, if you il persons to be
Name CBC	e and Address	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.13 of (Check one):	
	3 163279	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims	
Colu	ımbus, OH 43216		i
		Last 4 digits of account number	
Name	e and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	anced Recovery	Line <u>4.10</u> of (<i>Check one</i>): ☐ Part 1: Creditors with Priority Unsecured Claims	
	4 Bayberry Road ksonville, FL 32256	■ Part 2: Creditors with Nonpriority Unsecured Claims	;
Jaci	ASONVING, I L JEEJU	Last 4 digits of account number	
NI.		On which pate in Double and Double Plant Burney and Do	
	e and Address I's Payment Center	On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.5 of (<i>Check one</i>):	
	3 2983	Part 2: Creditors with Nonpriority Unsecured Claims	

Debtor 1 Howard Wilbur Lancaster

Debtor 1	Howard Wilbur Lancaster
Debtor 2	Jeannine Maureen Lancaster

_			,	
Case	nur	nhar	(if b	nown)

Milwaukee, WI 53201				
Milwaukee, Wi 33201	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
PNC Bank	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
POB 3180 Pittsburgh, PA 15230		Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			
Name and Address		2 did you list the original creditor?		
PNC Bank	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
POB 856177 Louisville, KY 40285		Part 2: Creditors with Nonpriority Unsecured Claims		
2001041110, 141 40200	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?		
PNC Bank	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
POB 856177 Louisville, KY 40285		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Louisville, ICT 40200	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?			
State Collection Service	Line 4.16 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
POB 6250 Madison, WI 53716		■ Part 2: Creditors with Nonpriority Unsecured Claims		
madi3011, 111 007 10	Last 4 digits of account number			
Name and Address		2 did you list the original creditor?		
Sunrise Credit Services	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
POB 9100 Farmingdale, NY 11735		Part 2: Creditors with Nonpriority Unsecured Claims		
Turmingualo, IVI TITOO	Last 4 digits of account number			
Name and Address	·	2 did you list the original creditor?		
TriHealth SBO	Line 4.16 of (Check one):	Part 1: Creditors with Priority Unsecured Claims		
POB 630892 Cincinnati, OH 45263		■ Part 2: Creditors with Nonpriority Unsecured Claims		
	Last 4 digits of account number			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	٠,		•	Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 45,075.10
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 45,075.10

Fill in this information to identify your case:						
Debtor 1	1 Howard Wilbur Lancaster					
	First Name	Middle Name	Last Name			
Debtor 2	Jeannine Maureen Lancaster					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF OHIO			
Case number _					П	Check if this is an
,					Ь	amended filing
						amenaea ming

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Guardian Alarm Company 75 Remittance Drive Dept 1376 Chicago, IL 60675	alarm service for 401 Fairbanks Avenue Cincinnati, Ohio 45204- REJECT
2.2	Honda Financial Services POB 600001 City of Industry, CA 91716	vehicle lease - ends June 2020- ASSUME

Fill in this	information to identify your case:	
Debtor 1	Howard Wilbur Lancaster	
	First Name Middle Name Last Name	
Debtor 2 (Spouse if, filin	Jeannine Maureen Lancaster (i) First Name Middle Name Last Name	
	es Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO	
O		
Case numb (if known)		☐ Check if this is an
		amended filing
Ott: -: - I	Farms 40011	
	Form 106H	
<u>Sched</u>	ule H: Your Codebtors	12/15
•	and case number (if known). Answer every question. You have any codebtors? (If you are filing a joint case, do not list either s	pouse as a codebtor.
■ No □ Yes		
	nin the last 8 years, have you lived in a community property state or to a, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas,	
	Go to line 3. Did your spouse, former spouse, or legal equivalent live with you at the ti	me?
in line Form 1 out Co	umn 1, list all of your codebtors. Do not include your spouse as a code 2 again as a codebtor only if that person is a guarantor or cosigner. I 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Follumn 2.	Make sure you have listed the creditor on Schedule D (Official
	lame, Number, Street, City, State and ZIP Code	Check all schedules that apply:
3.1		☐ Schedule D, line
	Name	☐ Schedule E/F, line
		☐ Schedule G, line
	Number Street City State ZIP Code	
		Dodata D. Car
3.2	Name	□ Schedule D, line □ Schedule E/F, line
		Schedule G, line
_	Number Street	
	City State ZIP Code	

	in this information to identify your c									
Det	otor 1 Howard Wil	bur Lancaster			_					
	otor 2 Jeannine M	aureen Lancaster			_					
Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF OHIO							
Cas	se number					Che	ck if this is:			
(If kr	nown)		-				An amende	ed filing		
									g postpetition ollowing date:	chapter
O.	fficial Form 106I					ī	MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
sup spo	es complete and accurate as posible plying correct information. If you use. If you are separated and you che a separate sheet to this form. Describe Employment	are married and not fili ir spouse is not filing w	ng jointly, and your ith you, do not inclu	spouse i de infori	is liv mati	ing with on aboι	n you, incl It your spo	ude inforr ouse. If m	nation about ore space is i	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more than one job,	Employment status	☐ Employed				☐ Empl	oyed		
	attach a separate page with information about additional employers.		■ Not employed				■ Not e	mployed		
		Occupation	retired				retired			
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, writ	e \$0 in the	space. In	clude your nor	n-filing
If yo	u or your non-filing spouse have meespace, attach a separate sheet to	ore than one employer, co this form.	ombine the informatio	n for all e	emplo	oyers for	r that perso	on on the li	nes below. If y	ou need
						For De	ebtor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	0.00	
3.	Estimate and list monthly over	ime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	0.00	

Case number (if known)

				Fo	r Debtor 1		Debtor 2 or	
	Conv	y line 4 here	4.	\$	0.00	\$	filing spouse 0.00	
	Copy	y line 4 nere	4.	Ψ_	0.00	Ψ	0.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	0.00	
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0-	Φ.	• • •	Φ.		
	01	monthly net income.	8a.	\$_	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	1,969.00	\$	1,572.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	 8g.	\$	0.00	\$	609.55	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,969.00	\$	2,181.55	
10	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		1,969.00 + \$	2 1	81.55 = \$	4,150.55
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. Ψ		1,909.00	۷,۱	σ1.55	4,130.33
11.	State Inclu- other	de all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your rifiends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	depen		-		chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$	4,150.55
							Combine	
13.	Do y ■	ou expect an increase or decrease within the year after you file this form No.	?				monthly	income
		Yes. Explain:						

Fill	in this information to identify your case:				
Deb	tor 1 Howard Wilbur Lancaster		Check	if this is:	
	Jeannine Maureen Lancaster ouse, if filing)		_ A		ving postpetition chapter the following date:
Unit	ed States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO)	N	MM / DD / YYYY	
	e number nown)				
Of	fficial Form 106J				
S	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people ar ormation. If more space is needed, attach another sheet to this nber (if known). Answer every question.				
Par	Describe Your Household Is this a joint case?				
••	□ No. Go to line 2.				
	■ Yes. Does Debtor 2 live in a separate household?				
	■ No □ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	-			☐ Yes ☐ No
					□ No □ Yes
					□ No
					Yes
					□ No □ Yes
3.	Do your expenses include ■ No				□ res
	expenses of people other than yourself and your dependents?				
exp	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless yourses as of a date after the bankruptcy is filed. If this is a suppolicable date.				
the	lude expenses paid for with non-cash government assistance i value of such assistance and have included it on Schedule I: \ ficial Form 106l.)	f you know Your Income		Your expe	enses
4.	The rental or home ownership expenses for your residence. I payments and any rent for the ground or lot.	nclude first mortgag	e 4. \$		1,585.00
	If not included in line 4:				
	4a. Real estate taxes4b. Property, homeowner's, or renter's insurance		4a. \$ 4b. \$		0.00 185.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
_	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as ho	me equity loans	5. \$		0.00

Deb Deb	tor 1 tor 2		Wilbur Lancaster e Maureen Lancaster	Case number (if known)			
_		_					
6.	Utiliti 6a.		heat, natural gas	6a.	¢	225.00	
	6b.		wer, garbage collection	6b.	·	68.00	
	6c.		e, cell phone, Internet, satellite, and cable services	6c.	\$	175.00	
	6d.	Other. Spe		6d.	\$	0.00	
7.			ekeeping supplies	— od. 7.	\$	400.00	
8.			children's education costs	8.	\$	0.00	
9.			ry, and dry cleaning	9.	\$	100.00	
			products and services	10.	\$	15.00	
11.			ntal expenses	11.	·	0.00	
			Include gas, maintenance, bus or train fare.		Ψ	0.00	
		•	ar payments.	12.	\$	210.00	
13.			clubs, recreation, newspapers, magazines, and books	13.	\$	50.00	
14.	Chari	itable conti	ributions and religious donations	14.	\$	5.00	
15.	Insur	rance.					
			surance deducted from your pay or included in lines 4 or 20.				
		Life insura		15a.	*	330.71	
		Health insi		15b.	· • — — — — — — — — — — — — — — — — — —	0.00	
		Vehicle ins		15c.	·	180.00	
			Irance. Specify:	15d.	\$	0.00	
	Speci	ify:	clude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00	
17.			ease payments: ents for Vehicle 1	17a.	¢	478.61	
		. ,	ents for Vehicle 2	17a. 17b.	·		
		Other. Spe		17b. 17c.	·	0.00 0.00	
		Other. Spe	-	— 17d.	·	0.00	
18		•	of alimony, maintenance, and support that you did not report as	17u.	Ψ	0.00	
10.			your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00	
19.			s you make to support others who do not live with you.		\$	0.00	
	Speci	ify:		19.			
20.	Othe	r real prope	erty expenses not included in lines 4 or 5 of this form or on Sched	lule I: Yo	our Income.		
	20a.	Mortgages	s on other property	20a.	\$	0.00	
	20b.	Real estate	e taxes	20b.	\$	0.00	
	20c.	Property, h	homeowner's, or renter's insurance	20c.	\$	0.00	
	20d.	Maintenan	nce, repair, and upkeep expenses	20d.	\$	0.00	
	20e.	Homeown	er's association or condominium dues	20e.	\$	0.00	
21.	Othe	r: Specify:	timeshare maintenance fees	21.	+\$	54.00	
22	Calcı	ulate vour r	monthly expenses				
~~.		-	through 21.		\$	4,061.32	
			2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	4,001.32	
						4 064 32	
	22C. /	Add line 228	a and 22b. The result is your monthly expenses.		\$	4,061.32	
23.	Calcu	ulate your r	monthly net income.				
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	4,150.55	
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	4,061.32	
	23c.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	89.23	
24.	For ex	cample, do yo	an increase or decrease in your expenses within the year after you but expect to finish paying for your car loan within the year or do you expect your naterms of your mortgage?			or decrease because of a	
	☐ Ye	es.	Explain here:				

	information to identify your	case:		
Debtor 1	Howard Wilbur La	ancastor		
DODIOI 1	First Name		Name	
Debtor 2	Jeannine Mauree	n Lancaster		
(Spouse if, filin	g) First Name	Middle Name Last	Name	
United Stat	tes Bankruptcy Court for the:	SOUTHERN DISTRICT OF OHIO		
Case numb	ner			
(if known)				☐ Check if this is an
				amended filing
Decla		n Individual Debto		12/15
		n connection with a bankruptcy case	can recult in fines up to \$250 0	
years, or be	oth. 18 U.S.C. §§ 152, 1341, 1		can result in fines up to \$250,0	00, or imprisonment for up to 20
	Sign Below	519, and 3571.		00, or imprisonment for up to 20
Did ye	Sign Below ou pay or agree to pay some			00, or imprisonment for up to 20
Did ye	Sign Below	519, and 3571.		00, or imprisonment for up to 20
Did yo	Sign Below ou pay or agree to pay some	519, and 3571.	you fill out bankruptcy forms? Attach <i>Bar</i>	00, or imprisonment for up to 20 akruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
Did you	Sign Below ou pay or agree to pay some No Yes. Name of person penalty of perjury, I declare they are true and correct.	519, and 3571. one who is NOT an attorney to help that I have read the summary and so	you fill out bankruptcy forms? Attach Bar Declaration	nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
Did you be a second of the sec	Sign Below ou pay or agree to pay some No Yes. Name of person penalty of perjury, I declare	519, and 3571. one who is NOT an attorney to help that I have read the summary and so	you fill out bankruptcy forms? Attach Bar Declaration	nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119) ion and
Did you be a second of the sec	Sign Below ou pay or agree to pay some No Yes. Name of person penalty of perjury, I declare ley are true and correct. / Howard Wilbur Lancasto	one who is NOT an attorney to help that I have read the summary and so	you fill out bankruptcy forms? Attach Bar Declaration Chedules filed with this declarati	nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119) ion and

FIII	in this infor	mation to identify you	r case:							
Del	btor 1	Howard Wilbur I	Lancaster Middle Name	Loot Name						
Del	btor 2	Jeannine Maure		Last Name						
1	ouse if, filing)	First Name	Middle Name	Last Name						
Uni	ited States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT C	OF OHIO						
1	se number nown)				_	Check if this is an mended filing				
St	atement	and accurate as poss		re filing together, both are	equally responsible for sup					
		nore space is needed, n). Answer every que		this form. On the top of an	y additional pages, write you	ır name and case				
Pa	t 1: Give	Details About Your Ma	arital Status and Where You	Lived Before						
1.	What is you	ır current marital statı	us?							
	■ Married Not ma	-								
2.	During the last 3 years, have you lived anywhere other than where you live now?									
	■ No□ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there				
3. state					ity property state or territory ico, Texas, Washington and W					
	■ No □ Yes. M	ake sure you fill out <i>Sci</i>	hedule H: Your Codebtors (Ot	fficial Form 106H).						
Pai	rt 2 Expla	in the Sources of You	ır Income							
4.	Fill in the tot	al amount of income yo	mployment or from operating the received from all jobs and a have income that you received.	all businesses, including part		ndar years?				
	□ No									
	Yes. Fi	II in the details.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
	r last calend nuary 1 to D	ar year: ecember 31, 2018)	■ Wages, commissions, bonuses, tips	\$26,999.01	☐ Wages, commissions, bonuses, tips	\$0.00				
			☐ Operating a business		☐ Operating a business					

Official Form 107

				Debtor 1			Debtor 2			
				Sources of income Check all that apply.		income deductions and ons)	Sources of inco Check all that ap		Gross income (before deductions and exclusions)	
		dar year be December		■ Wages, commissions, bonuses, tips		\$28,000.00	☐ Wages, commissions, bonuses, tips		\$0.00	
				☐ Operating a business			☐ Operating a b	usiness		
5.	Include in and other	come regard public bene	lless of wheth fit payments;	e during this year or the two ner that income is taxable. Ex pensions; rental income; inte se and you have income that	camples of erest; divide	other income are a ends; money collec	limony; child suppo ted from lawsuits; ro	oyalties; and		
	List each	source and	the gross inco	ome from each source separa	ately. Do no	ot include income the	hat you listed in line	4.		
	□ No ■ Yes.	Fill in the de	etails.							
				Debtor 1 Sources of income Describe below.	each s	deductions and	Debtor 2 Sources of inco Describe below.	me	Gross income (before deductions and exclusions)	
		y 1 of curre filed for bar	nt year until nkruptcy:	Social Security Benefits	o.co.co.	\$16,949.50	Social Security Benefits	y	\$15,373.00	
						\$0.00	pension		\$5,485.95	
	r last caler anuary 1 to	ndar year: December	31, 2018)	Social Security Benefits		\$25,416.00	Social Security Benefits	у	\$20,498.00	
		dar year be December		Social Security Benefits		\$25,416.00	Social Security Benefits	y	\$20,498.00	
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for	Bankrupt	су				
6.				's debts primarily consume	_					
υ.	☐ No.	Neither D	ebtor 1 nor D	Debtor 2 has primarily consume personal, family, or househo	umer debt		s are defined in 11 L	J.S.C. § 10°	1(8) as "incurred by an	
		During the	90 days befo	ore you filed for bankruptcy, d	did you pay	any creditor a tota	l of \$6,825* or more	?		
		□ Yes	List below e	each creditor to whom you pa editor. Do not include payme	nts for don	estic support oblig				
		* Subject		payments to an attorney for t t on 4/01/22 and every 3 year			or after the date of	adjustment		
	■ Yes.			or both have primarily const ore you filed for bankruptcy, d			I of \$600 or more?			
		■ No.	Go to line 7	·.						
		□ Yes	List below e	each creditor to whom you pa rements for domestic support o this bankruptcy case.						
	Creditor	's Name an	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for	

Debto Debto				Ca	se number (if kno	wn)				
In of a	Within 1 year before you filed for bankrup asiders include your relatives; any general properties of which you are an officer, director, person business you operate as a sole proprietor. limony.	oartner in cont	s; relatives of any gerol, or owner of 20%	eneral partners; partn or more of their votin	erships of which g securities; and	you are a gener d any managing a	al partner; corporations agent, including one for			
	No									
	Yes. List all payments to an insider.									
I	Insider's Name and Address	Da	tes of payment	Total amount paid	Amount you still ow		this payment			
in	Vithin 1 year before you filed for bankrupnsider? Include payments on debts guaranteed or co	-		nyments or transfer	any property o	n account of a d	ebt that benefited an			
	No									
l:	Insider's Name and Address	Da	tes of payment	Total amount paid	Amount you still ow		r this payment ditor's name			
Part 4	4: Identify Legal Actions, Repossession	ons. a	nd Foreclosures							
	Case title Case number	Na	ture of the case	Court or agency	,	Status of the	ne case			
	Vithin 1 year before you filed for bankrup Check all that apply and fill in the details bel No. Go to line 11. Yes. Fill in the information below.		as any of your pro	perty repossessed,	foreclosed, gar	nished, attache	d, seized, or levied?			
C	Creditor Name and Address	De	scribe the Property	/	Da	ite	Value of the			
		Ex	plain what happen	ed			property			
a	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.									
C	Creditor Name and Address	De	scribe the action th	ne creditor took		te action was	Amount			
12. W	taken Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?									
	No									
	☐ Yes									
Part 5	List Certain Gifts and Contributions	3								
13. W	Vithin 2 years before you filed for bankru No	ıptcy,	did you give any gi	fts with a total value	of more than S	6600 per person	?			
	Gifts with a total value of more than \$600 per person)	Describe the gift	s	ites you gave e gifts	Value				
	Person to Whom You Gave the Gift and									

Debte Debte		•	Case num	nber (if known)	
4. V	Nithin 2 years before you filed for bank ■ No	cruptcy,	did you give any gifts or contributions with a	total value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or	contribu	tion.		
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed	Dates you contributed	Value
Part	6: List Certain Losses				
	Nithin 1 year before you filed for bankr or gambling?	uptcy o	r since you filed for bankruptcy, did you lose	anything because of the	ft, fire, other disaster
ı	■ No				
[☐ Yes. Fill in the details.				
	Describe the property you lost and	Desci	ribe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Includ	e the amount that insurance has paid. List pending claims on line 33 of Schedule A/B: Property.	ng loss	lost
Part	7: List Certain Payments or Transfe	re			
[nclude any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid	prepare	rs, or credit counseling agencies for services req Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not	You	transferred	or transfer was made	payment
	Daugherty Law 8686 Winton Road Cincinnati, OH 45231 debtreliefsoon@gmail.com		Attorney Fees	9/7/2019	\$700.00
	CC Advising 703 Washington Avenue Suite 200 Terre Haute, IN 47808 www.ccadvising.com		credit counseling certificate	8/31/2019	\$19.52
	Apprisen 690 Taylor Road Suite 150 Columbus, OH 43230		\$818.00 1st payment of debt settlemer plan	nt 8/1/2019	\$818.00
F		editors	lid you or anyone else acting on your behalf p or to make payments to your creditors? ted on line 16.	oay or transfer any prope	erty to anyone who
[☐ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes, Fill in the details.							
	Person Who Received Transfer Address Person's relationship to you	Description and v			any property or s received or debts cchange	Date transfer was made		
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.							
	Name of trust Description and value of the property transferred				red	Date Transfer was made		
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association No	were any financial ac	counts or instru	ments held in		, ,		
		ast 4 digits of account number	Type of accourtinstrument	cle me	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer		
21.	cash, or other valuables? ■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)			contents	Do you still have it?		
22.	Have you stored property in a storage unit or No Yes. Fill in the details.	place other than your	home within 1 y	rear before y	ou filed for bankruptcy	y?		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?		
Pai	t 9: Identify Property You Hold or Control fo	or Someone Else						
23.	Do you hold or control any property that some for someone. No Yes. Fill in the details.	eone else owns? Incli	ude any property	you borrow	ed from, are storing fo	r, or hold in trust		
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the	property	Value		
Pai	t 10: Give Details About Environmental Infor	mation						
For	the purpose of Part 10, the following definition	is apply:						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ☐ Yes. Fill in the details. **Case Title** Nature of the case Court or agency Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed

☐ Yes. Fill in the details below.

institutions, creditors, or other parties.

Name Address (Number, Street, City, State and ZIP Code) **Date Issued**

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial

Debtor 1 Howard Wilbur Lancaster	
Debtor 2 Jeannine Maureen Lancaster	Case number (if known)
are true and correct. I understand that making a fall with a bankruptcy case can result in fines up to \$25 18 U.S.C. §§ 152, 1341, 1519, and 3571.	se statement, concealing property, or obtaining money or property by fraud in connection 50,000, or imprisonment for up to 20 years, or both.
/s/ Howard Wilbur Lancaster	/s/ Jeannine Maureen Lancaster
Howard Wilbur Lancaster	Jeannine Maureen Lancaster
Signature of Debtor 1	Signature of Debtor 2
Date September 9, 2019	Date September 9, 2019
Did you attach additional pages to <i>Your Statement</i> ■ No □ Yes	of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not an ■ No	attorney to help you fill out bankruptcy forms?
☐ Yes. Name of Person Attach the Bankruptc	y Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

United States Bankruptcy Court Southern District of Ohio

In	Howard Wilbur Lancaster Te Jeannine Maureen Lancaster		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(tompensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for service	
	For legal services, I have agreed to accept		\$	700.00	
	Prior to the filing of this statement I have received			700.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	bers and associate	es of my law firm.
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name				ny law firm. A
5.	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspect	s of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hour 	ment of affairs and plan which rs and confirmation hearing, an educe to market value; exe as as needed; preparation	may be required; and any adjourned hea	rings thereof;	nd filing of
5.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.	does not include the following chargeability actions, judi	g service: cial lien avoidanc	es, relief from	stay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of t	he debtor(s) in
_	September 9, 2019	/s/ Cynthia S. Dai			
	Date	Cynthia S. Daugh Signature of Attorne			
		Daugherty Law	y.		
		8686 Winton Roa			
		Cincinnati, OH 45			
		513-484-9486 Fa debtreliefsoon@			
		Name of law firm	Ja		

Fill in	n this inforr	nation to identify your case:		Ch	eck one box only	as dire	ected in	this form and	in Form
Debt	tor 1	Howard Wilbur Lancaster			2A-1Supp:	ao an c	potou iii	tino form and	
Debt					_				
	se, if filing)	Jeannine Maureen Lancaster		'	1. There is no	presur	nption c	of abuse	
Unite	ed States E	Bankruptcy Court for the: Southern District o	f Ohio		2. The calcula				•
					applies will Calculation			er <i>Chapter 7 N</i> n 122A-2).	leans Lest
(if kno	e number _(wn)				☐ 3. The Means	•		,	rause of
	,							but it could app	
					☐ Check if this	is an	ameno	ded filing	
Off	icial F	orm 122A - 1						_	
Ch	apter	7 Statement of Your Cur	rent Mo	nthly Inc	ome				12/15
attach case i qualif Part	n a separate number (if k ying militar 1: Ca	and accurate as possible. If two married people a sheet to this form. Include the line number to with the second of the second o	hich the addition a presumption from Presu	onal information a n of abuse becau	pplies. On the top se you do not hav	o of any e prima	addition	nal pages, write sumer debts or	your name and because of
1.	_	our marital and filing status? Check one onlarried. Fill out Column A, lines 2-11.	у.						
			t hath Caluman	- A D lines	0.44				
		d and your spouse is filing with you. Fill ou d and your spouse is NOT filing with you. \			Z-11.				
	_	a and your spouse is NOT filling with you. You in the same household and are not legal	•	•	lumns A and P li	inos 2	11		
	_	ng separately or are legally separated. Fill o	•		,			thic have you	doctoro undor
	pen	alty of perjury that you and your spouse are leg g apart for reasons that do not include evadin	gally separate	d under nonban	kruptcy law that	applies	or that		
10 the	01(10A). For e 6 months,	rage monthly income that you received from all sexample, if you are filing on September 15, the 6-mm add the income for all 6 months and divide the total he same rental property, put the income from that property.	onth period woul by 6. Fill in the re	d be March 1 throu esult. Do not includ	ugh August 31. If the	e amou	nt of your	r monthly income nce. For example	e varied during e, if both
					Column A Debtor 1		Column Debtor non-fili		
2.	Your gros	ss wages, salary, tips, bonuses, overtime, a	ınd commissi	ions (before all		00	•	0.00	
	payroll de	,		.,	\$0.	00	\$	0.00	
3.		and maintenance payments. Do not include is filled in.	payments from	a spouse if	\$ 0.	00	\$	0.00	
4.	of you or from an ur and room	nts from any source which are regularly pa your dependents, including child support. Inmarried partner, members of your household mates. Include regular contributions from a spro o not include payments you listed on line 3.	Include regula , your depende	ents, parents,	\$ 0.	00	\$	0.00	
5.		ne from operating a business, profession, o	or farm						
				btor 1					
	Gross rec	eipts (before all deductions)	\$ 0.00	_					
	•	and necessary operating expenses	-\$ 0.00	_	•	00	Φ.	0.00	
		nly income from a business, profession, or farm	n \$	Copy here ->	\$0.	00	\$	0.00	
6.	Net incon	ne from rental and other real property	De	btor 1					
	Gross res	oints (hoforo all doductions)	\$ 0.00						
		eipts (before all deductions) and necessary operating expenses	-\$ 0.00	_					
	•	and necessary operating expenses	*	Copy here ->	\$ 0.	00	\$	0.00	

Official Form 122A-1

0.00

7. Interest, dividends, and royalties

0.00

Debtor 1 Debtor 2

				Column A Debtor 1		Column B Debtor 2 o non-filing		
8.	Unemployment compensation			\$	0.00	\$	0.00	
0.	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	nt received was a ben	efit under	·			<u> </u>	
	For you	\$	0.00					
	For your spouse		0.00					
9.	Pension or retirement income. Do not include any a benefit under the Social Security Act.			\$	0.00	\$	609.55	
10.	Income from all other sources not listed above. Sp Do not include any benefits received under the Social received as a victim of a war crime, a crime against hudomestic terrorism. If necessary, list other sources on total below.	Security Act or payments among the security or internation a separate page and	ents al or	\$ \$	0.00	\$\$	0.00	
				\$	0.00	· ———	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add I each column. Then add the total for Column A to the t		\$	0.00	+ \$_	609.55	= \$	609.55
Part	2: Determine Whether the Means Test Applies	to You					income	urrent monthly
12.	Calculate your current monthly income for the yea	r. Follow these steps:						
	12a. Copy your total current monthly income from line	11		Сор	y line 11	here=>	\$	609.55
	Multiply by 12 (the number of months in a year)						x 1	
	12b. The result is your annual income for this part of the	ne form				12k	P. \$	7,314.60
13.	Calculate the median family income that applies to	you. Follow these st	eps:					
	Fill in the state in which you live.	ОН						
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size	e of household.				13.	ι (\$	52,308.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the ban	online using the link						
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1,	check box	1, There is	no presun	nption of abus	se.	
	14b. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box	2, The pre	esumption o	f abuse is	determined b	y Form 12	2A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjur	y that the information	on this sta	atement and	in any att	achments is t	rue and co	orrect.
	X /s/ Howard Wilbur Lancaster	x	/s/ .lean	nnine Mauı	reen I an	caster		
	Howard Wilbur Lancaster	X		ne Mauree				
	Signature of Debtor 1			e of Debtor 2				
	Date September 9, 2019 MM / DD / YYYYY	Date	Septem MM / DD	nber 9, 201	19			
	If you checked line 14a, do NOT fill out or file For	m 122A-2.						
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.						

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 03/01/2019 to 08/31/2019.

Non-CMI - Social Security Act Income

Source of Income: social security income

Income by Month:

6 Months Ago:	03/2019	\$2,118.70
5 Months Ago:	04/2019	\$2,118.70
4 Months Ago:	05/2019	\$2,118.70
3 Months Ago:	06/2019	\$2,118.70
2 Months Ago:	07/2019	\$2,118.70
Last Month:	08/2019	\$2,118.70
	Average per month:	\$2,118.70

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **03/01/2019** to **08/31/2019**.

Line 9 - Pension and retirement income

Source of Income: Reynolds Retirement Pension

Income by Month:

6 Months Ago:	03/2019	\$609.55
5 Months Ago:	04/2019	\$609.55
4 Months Ago:	05/2019	\$609.55
3 Months Ago:	06/2019	\$609.55
2 Months Ago:	07/2019	\$609.55
Last Month:	08/2019	\$609.55
	Average per month:	\$609.55

Non-CMI - Social Security Act Income

Source of Income: social security income

Income by Month:

6 Months Ago:	03/2019	\$1,708.20
5 Months Ago:	04/2019	\$1,708.20
4 Months Ago:	05/2019	\$1,708.20
3 Months Ago:	06/2019	\$1,708.20
2 Months Ago:	07/2019	\$1,708.20
Last Month:	08/2019	\$1,708.20
	Average per month:	\$1,708.20

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
<u>+</u>	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Americollect POB 1690 Manitowoc, WI 54221

Capital One 15000 Capital One Drive Henrico, VA 23238

CBCS POB 163279 Columbus, OH 43216

Cenlar Federal Savings & Loan POB 77404 Trenton, NJ 08628

Cenlar payment processing Center POB 11733 Newark, NJ 07101

Charter Communications 12405 Powerscourt Drive Saint Louis, MO 63131

Duke POB 1327 Charlotte, NC 28201-1327

Enhanced Recovery 8014 Bayberry Road Jacksonville, FL 32256

Guardian Alarm Company 75 Remittance Drive Dept 1376 Chicago, IL 60675

Honda Financial Services POB 600001 City of Industry, CA 91716

Kohl's Payment Center POB 2983 Milwaukee, WI 53201

Kohl's/Capital One POB 3115 Milwaukee, WI 53201-3115

Mercy Medical Transportation 25250 W. 8 Mile Road Southfield, MI 48033

PNC Bank 1 Financial Pkwy Kalamazoo, MI 49009

PNC Bank POB 3180 Pittsburgh, PA 15230

PNC Bank POB 856177 Louisville, KY 40285

Spectrum POB 1060 Carol Stream, IL 60132

Sprint Nextel Attn: Bankruptcy Dept POB 7949 Overland Park, KS 66207

State Collection Service POB 6250 Madison, WI 53716

State of Ohio Department of Taxation POB 530 Columbus, OH 43216-0530

Sunrise Credit Services POB 9100 Farmingdale, NY 11735

Synchrony Bank/Care Credit Attn: Bankruptcy Department POB 965061 Orlando, FL 32896-5061

Synchrony Bank/TJX Attn: Bankruptcy Department POB 965061 Orlando, FL 32896-5061

The Christ Hospital POB 635904 Cincinnati, OH 45263

The Family Medical Group 6331 Glenway Avenue Cincinnati, OH 45211

The Home Depot/CBNA POB 6497 Sioux Falls, SD 57117

TriHealth 619 Oak Street Cincinnati, OH 45206

TriHealth SBO POB 630892 Cincinnati, OH 45263

UC Health POBox 630861 Cincinnati, OH 45263

Verizon POB 25505 Lehigh Valley, PA 18002-5505